United States Of America

Bepartment of Transportation - Federal Abiation Administration

Supplemental Type Certificate

Number SA3727SW

This Certificate issued to

RAM Aircraft, Limited Partnership 7505 Karl May Drive Waco, TX 76708

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Aix Regulations.

Original Product Type Certificate Number:

Cessna

Model: 172 I, K, L, M, N and P

Description of Type Design Change:

Installation vacuum pump cooling shroud in accordance with RAM Drawing No. 1221, "Vacuum Pump Cooling Shroud Installation", Revision B, dated February 11, 1987, and RAM Drawing No. 1199, "Vacuum Pump Cooling Shroud Detail", Revision B, dated February 17, 1987, or later FAA approved revisions.

Limitations and Conditions :

Compatibility of this design change with previously approved modifications must be determined by the installer. If the holder agrees to permit another person to use this certificate to alter the product, the holder shall give the other person written evidence of that permission.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: July 31, 1986

Date reissued: October 8, 2001

Date of issuance: March 06, 1987

Date amended:

By direction of the Administrator

Prances Cbx, Manager

Special Certification Office,

(Signature)

Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate. The FAA will reissue the certificate in the name of the transferee and forward it to him. TRANSFER ENDORSEMENT Transfer the ownership of Supplemental Type Certificate Number to (Name of transferee)_____ (Address of transferee) _______(Number and street) (City, State, and ZIP code) from (Name of grantor) (Print or type) (Number and street) (Address of grantor) (City, State, and ZIP code) Extent of Authority (if licensing agreement): Date of Transfer: Signature of grantor (In ink):